

Engelmann (G. J.)

No. 4

# A HYSTERO-PSYCHOSIS.

## EPILEPSY

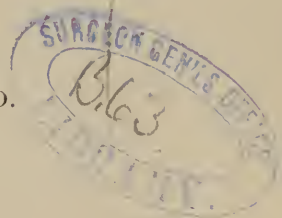
DEPENDENT UPON

*Presented by the  
Author*

## EROSIONS OF THE CERVIX UTERI.

BY

GEO. J. ENGELMANN, M. D.



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# A HYSTERO-PSYCHOSIS.

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Epilepsy Dependent Upon Erosions of the  
Cervix Uteri.

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BY GEO. J. ENGELMANN, M. D.

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I have of late endeavored to call attention to a class of cases which I have described as hystero-neuroses; cases which may simulate the most varied diseases, but which are mere reflex phenomena dependent upon uterine derangements and are distinctly proven to be so dependent by their disappearance upon cure of the uterine affection by local treatment.

The subjoined case is a reflex insanity following and caused by disease of the womb, a hystero-psychosis, or more definitely, a hystero-epilepsy; hystero-epilepsy proper—epilepsy with a uterine causation—not hystero-epilepsy as the term is used by alienists, also by Hammond and others, *i. e.*, epilepsy in hysterical women or epilepsy accompanied by erotic manifestations.

Mrs. O., a medium-sized brunette, aged twenty-eight, was first menstruated in her fifteenth year and married in her twenty-fourth; period perfectly normal, both before and after marriage, lasting three days, never painful; has always been healthy; no hereditary taint. She had one miscarriage, in about the sixth week, soon after marriage; since then has borne two children, the youngest of which is now eighteen months old.

A few weeks after the last confinement she first complained of that heaviness of the head, the dizziness and languor from which she has suffered ever since; the epileptic attacks appeared at the same time, at first in a very mild form, once or twice a month, as

an oppression of the chest and a shortness of breath which would pass away in the course of five or ten minutes.

These attacks rapidly increased in frequency and in severity, beginning in the same way with a shortness of breath, an oppression, a feeling of constriction of the chest, then a twitching in the fingers, a spasmodic closing of the hands and she becomes unconscious; convulsive movements of the arms and opisthotonus follow; this is sometimes so intense that the heels almost touch the head and the contraction of the dorsal muscles has been so sudden and so violent that the patient has hurled herself from the middle of the bed upon the floor by a single effort.

During the attack, which lasts from ten to fifteen minutes, the patient is totally unconscious, eyes are closed, hands not firmly clinched, thumbs not turned in; a stage of relaxation follows. During the last month she was confined to her bed, the attacks were severe and quite frequent, and her condition grew constantly more unbearable, notwithstanding the liberal use of chloral and bromide of potash which was very properly prescribed by the physician in attendance.

As the patient did not improve, Dr. H. Greiner was called in; he pursued a similar course of treatment, adding opium injections; by a mistake of the patient's, a teaspoonful of the strong tincture of opium was taken internally, but even this did not check the attacks which now appeared three or four times a day, lasting with great intensity from ten to fifteen minutes at a time.

March 18, 1878, I first saw Mrs. O., in consultation with Dr. Greiner; we had hardly entered the room when her hands began to twitch, her eyes closed, her head was plunged into the bedding and complete opisthotonus was established; the spasm yielded for a moment to return with increased severity, the violent contractions of the dorsal muscles hurling the patient from one side of the bed to the other so that she was with difficulty held down by our combined efforts. After the attack, which lasted about twelve minutes, a stupor supervened.

I found the patient in great suffering, complaining especially of dorsal and hypogastric pain, heaviness of the head, occasional febrile symptoms, and, at times, nausea and vomiting more particularly in the morning; the bowels were constipated, conjunctiva slightly injected, pupils normal, reaction perfect but slow. She had a dull, stupid look and was not very prompt in her answers;

in fact Dr. Greiner had told me that I must have patience, as she was rather slow of understanding. The abdomen was tense and very sensitive to the touch, especially so in the right side where we found some dullness on percussion, slight tumefaction and apparently a gurgling sound on pressure.

The vaginal walls were swollen; the cervix uteri was enlarged and congested with extensive erosions (generally spoken of as ulcerations) surrounding the os; the cervix was very sensitive but not so exquisitely painful upon the slightest touch as the enlargement which could be felt just behind it in the posterior cul-de-sac; a harder and less sensitive tumor was found to the left, probably fæcal masses.

Although one period had been missed, patient having last menstruated on the 18th of January, I determined to pass the sound, which entered easily to the depth of  $7\frac{3}{4}$  c. m., caused no pain, did not give a soft feel when pressed against the fundus, and did not bring a drop of blood. The condition of the pelvic organs was such that a careful examination could not be made; pregnancy was probable, but as I deemed the epileptic attack to be due to the pathological condition of the womb, I determined to confine the treatment to this organ and its adnexa, regardless of the consequences to the ovum, and to stop all medication.

The eroded cervix was thoroughly cauterized with nitric acid and a glycerine cotton tampon introduced; warm poultices were ordered to the abdomen and three times a day vaginal injections, first flax-seed tea with opium, later hot water; the bowels were kept open by mild laxatives.

With the exception of a slight spasm on the evening of the 18th, the epileptic attacks did not recur from the time of the application of the nitric acid until the 22nd, notwithstanding the discontinuance of all sedatives. The abdominal hardness and pain disappeared entirely in the course of two days, the patient was soon comfortable, but weak; and an attack of intermittent which made its appearance, readily yielded to quinine.

On the 23d the parts were soft, yielding, no longer sensitive, and I was enabled to make a thorough bi-manual examination; I found an elastic tumor in the posterior cul-de-sac which I supposed to be a retroflected gravid uterus; fearing a return of the epileptic attacks, and the vomiting being quite annoying, I determined to satisfy myself as to the condition, and with sound and fingers I

replaced the uterus and moved the sound freely about in the cavity of the womb; neither blood nor liquor amnii followed this insult. Carbolic acid 3i to ʒi, (Glycerine and Spirit. Vini aa), was then applied to the greatly improved cervix.

On the 24th the patient had a very severe attack for which Dr. Greiner was obliged to resort to the use of chloroform; on the following day we again met at the bed side; the erosion was improving, the womb was in its normal position, hence the previously existing flexion could not have produced the neurosis. As merely a slight show of blood had followed the previous use of the sound I became doubtful as to the diagnosis of pregnancy, but determined to relieve the uterus of its contents, if there were any, I again passed the instrument freely around the supposed ovum, giving but little pain and causing no flow.

March 26th, no hemorrhage or discharge of any kind, no epileptic attacks, but vomiting distressing; a sponge tent was introduced in order that we might finally determine the cause of the uterine enlargement, and if due to a conception, produce miscarriage. The removal of the tent on the next day, the 27th, was followed by the expulsion of a healthy ovum on the 31st.

I did not see the patient until two days later and found her remarkably changed; her complexion was better, she had lost that dull, stupid look; vomiting had ceased with the expulsion of the ovum and the epileptic attacks had not returned since the severe spell on the 24th, in fact, had only appeared twice after the first cauterization of the cervix.

The abdomen was soft, there was no tenderness, she had no complaint to make and expressed herself as again feeling "like a well woman."

Two weeks after the miscarriage Mrs. O. was attending to the lighter duties of the household feeling more vigorous and more cheerful than she had felt at any time since the birth of her last child, the attacks had not recurred and she was free from that dizziness and languor which had previously oppressed her.

*Epilepsy was cured by an application of nitric acid to an eroded cervix.*

I have described two equally striking cases in my article on the hysteroneuroses; (Transactions of the American Gynecological Society, Vol. II, 1877) in one the epileptic attacks disappeared on cure of the erosions, endocervicitis and amenorrhœa; in the

other the result was still more remarkable, as an almost idiotic child, with frequent epileptic attacks of long duration, a burden to those about her, was restored as a useful member to the circle of her friends and developed into a fair-looking girl by establishment of the menstrual flow and cure of the uterine disorder.

Dr. J. M. McWhorter (Transactions of the Medical Society of West Virginia, 1877, p. 308) cites a similar case; epilepsy of four years standing, in a maiden lady twenty-six years of age, cured after a two months treatment of the diseased womb and cure of the "nleerations" about the os. In this case ten years have elapsed without a return of the epileptic attacks, the lady enjoys good health, her mental faculties remain unimpaired and she has become the mother of two healthy children.

I do not doubt it to have been a genuine case of hystero-psychosis, although Dr. McWhorter combined the local treatment with the internal use of iodide and bromide of potash, to which, it must be remembered, I did not resort in my cases.

These cases of Hystero-Neuroses, of reflex disease, whether of the nerve centres, of the pharynx, the bronchi or other organs, merit greater attention, and it should be accorded them on account of their practical importance to the family physician as well as the specialist. Our text-books are silent upon this subject which has been neglected to the detriment of many a sufferer; many a poor woman, with an intractable cough, or perhaps an annoying dyspepsia, has been in vain dosed with all the varied treasures of the pharmacopœia, when the speculum alone could have pointed the way to a successful treatment.

Worse still is the history of those unfortunates who have been thrust into insane asylums to end, as wretched beings deprived of reason, a life which might have been one of utility and of happiness, had the uterine disease, the primary cause of the mental derangement, been recognized and treated in time.

3003 Locust street, April, 1878.

